

Please indicate how well we did in the acquisition of your property by circling the appropriate category or checking the "not applicable" box.

	Excellent 5	Good 4	Average 3	Below Average 2	Poor 1	Not Applicable □
1. How well did we answer your questions about the proposed transportation project?			3			□
2. How well did we explain the need for your property and the process used to purchase your property?	5	4	3	2	1	□
3. Was the Right-of-Way Agent informed and responsive to your questions?	5	4	3	2	1	□
4. Was the Right-of-Way Agent courteous and professional?	5	4	3	2	1	□
5. How would you rate the usefulness of the printed material provided by the Department?	5	4	3	2	1	□

Comments: *Incorrect - other owner names on my land - I am sole owner. Unnecessary paper work on other land given to me.*

If you would like to be contacted by telephone to give additional information or comments, please complete this portion.

Name: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

DEPT. OF TRANSPORTATION  
RIGHT-OF-WAY

MAY 07 2007

To be completed by NHDOT Right-of-Way Agent

Project Number: *Conway 11339B* Parcel Number: \_\_\_\_\_

RECEIVED